

University of Illinois at Chicago  
Academic Staff  
2008-2009 Report of  
Non-University Activities (RNA)

## DISCLOSURE AND REQUEST FOR PRIOR APPROVAL

Last Name: Aronson

First Name: Sari

Title / Rank: Clinical Professor

College: Medicine

Dept. / Unit: Psychiatry

Appointment 50 %

University Contract Period<sup>1</sup>  
☐ 9 months/ ☐ 10 months/ ☒ 12 months/ ☐ Summer

### PART I. Conflict of Interest Screening

*Please attach an explanatory statement for all "yes" responses.*

1. Do you have a consulting or other financial relationship with a sponsor of your research? ☐ yes\* ☒ no
2. Do you or does any member of your family<sup>2</sup> have a managerial role or a significant<sup>3</sup> financial relationship with a company that does business with the University or with a company in a field of your research? ☐ yes\* ☒ no
3. Do you have non-University professional activities or income producing activities involving University of Illinois students, or other faculty or staff? ☐ yes\* ☒ no
4. Do you or does any member of your immediate family have any other relationships, commitments, or activities that might present or appear to present a conflict of interest or commitment with your University of Illinois appointment? Such relationships may include financial or fiduciary interests or uncompensated activities. Report these whether or not you believe the conflict is manageable. ☐ yes\* ☒ no

*\*Please list and explain in an attached statement any "yes" responses to the questions above. Lists in Part II do NOT suffice as explanation.*

### PART II. Listing of Non-University Income Producing Activities

\* If your appointment is less than 75% time, you do not need to complete this section.

\* Report total number of days, where an accumulation of eight hours equals one day, regardless of time of day or day of week.

\* Do not include amounts of compensation.

\* Do not report "various" when reporting retrospective activity.

\* Attach additional sheets if necessary

Nature of your activities (see instructions for examples)	For whom (e.g., company/ organization)	Do you have an ownership interest in this company / organization? (If so, please explain in an attached statement.)	2007-2008 Aug.16 - Aug.15 <u>Retrospective</u> Days Spent During this Reporting Period	2008-2009 Aug.16 - Aug.15 <u>Prospective</u> Days to be Spent in Current Reporting Period

☒ **I HAVE NO ACTIVITIES THAT I AM REQUIRED TO REPORT**

### PART III. Affirmation

I affirm that I have read the University's *Policy on Conflicts of Commitment and Interest*<sup>4</sup> and the above information is true to the best of my knowledge. *If significant changes in activities occur during the year, this form must be updated.*

Academic Staff Member's Signature

Sari G. Aronson MD

Date 9/24/2008

*Please submit to your unit head for administrative review and approval.*

<sup>1</sup> Check all that apply. The University contract period includes evenings, weekends and holidays during the term of employment.

<sup>2</sup> University Policy defines "Family" as one's spouse and children.

<sup>3</sup> Federal research regulations define "significant" as financial interests exceeding \$10,000 or representing more than 5% ownership regardless of dollar value. The Illinois Procurement Code (5 Illinois Compiled Statutes 500/50-13) prohibits the award of University contracts to companies in which University employees who earn more than 60% of the Governor's salary have either (a) ownership interests in excess of 7 1/2% or (b) entitlements to annual income in amounts in excess of the salary of the Governor (Governor's salary \$177,412 as of July 1, 2008.)

<sup>4</sup> The University Policy on Conflicts of Commitment and Interest is available at: [http://www.vnaa.uillinois.edu/policies/conflict\\_toc.asp](http://www.vnaa.uillinois.edu/policies/conflict_toc.asp)

## **Administrative Review and Approval, UIC RNUA 2008-2009**

*(Please complete the Conflict of Interest/Commitment Review AND Approval of Activities sections. See Instructions for Administrative Review and Approval regarding forwarding and retention of the Reports of Non-University Activities). Deans/Directors should forward forms they receive and review to the Office of the Vice Chancellor for Research (or appropriate Vice President for UA Staff).*

### **PART IV. Conflict of Interest/Commitment Review (Please attach a copy of any referenced explanation.)**

A. Based on the activity reported and to the best of my knowledge and in my judgment:

- ☒ No conflict of interest or commitment exists.
- ☐ A conflict of interest or commitment may exist, but is being monitored by the department.  
*If so, please attach an explanation and forward to the next administrative level (Dean, Director, or Vice President.*
- ☐ A conflict of interest or commitment may exist that warrants further review.  
*If so, please attach an explanation and forward to the next administrative level (Dean, Director, or Vice President.*

B. Please complete if question 3 on page 1 of the form is answered affirmatively:

As described by the academic staff member, the involvement of University of Illinois students, faculty and/or staff in his/her non-University activities does not appear to be detrimental to those individuals.

- ☐ Agree
- ☐ Disagree  
*If so, please attach an explanation and forward to the next administrative level (Dean, Director, or Vice President.*

### **PART V. Approval of Activities (Please attach a copy of any referenced explanation.)**

A. Retrospective Activities (2007-2008)

- ☒ No retrospective activities are reported or all retrospective activities are approved.
- ☐ Some or all retrospective activities are not approved.  
*If so, please attach an explanation and forward to the next administrative level (Dean, Director, or Vice President.*

B. Prospective Activities (2008-2009)

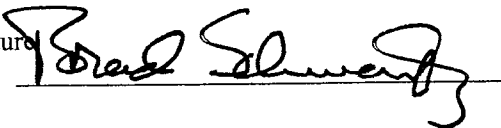
- ☒ No prospective activities are reported or all prospective activities are approved.
- ☐ Some or all declared prospective activities are not approved.  
*If so, please attach an explanation and forward to the next administrative level (Dean, Director, or Vice President.)*

The above information is correct and complete to the best of my knowledge.

Unit Head Signature \_\_\_\_\_ Date \_\_\_\_\_

### **PART VI. Review and Approval of Activities by Dean and Others as Required.**

Dean/Director/VP Signature  
(If approval needed)



Date 10/09/08

Additional Reviews  
(Signatures)

\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

# **DIVIDING AND REQUEST FOR PRIOR APPROVAL**

Last Name: HAZLEY  
 First Name: CHARLES  
 Title / Rank: Clinical Asst. Prof.  
 College: MEDEGENE  
 Dept. / Unit: PHYSICIAN  
 Appointment: 10%

University Calendar Period:  
 5 months / 10 months / X 12 months / Summer

## **Part 1: Filing of Form University Income Declaration Activities**

I have completed and signed responses to your questionnaire.  
 I have not signed the questionnaire.  
 I have not signed the questionnaire, which is a violation of University policy.  
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 I have not signed the questionnaire, which is a violation of University policy.

Nature of your activities (see instructions for)	For whom (e.g.,)	Do you have an ownership interest in this company / organization? (If so, please explain in attached statement)	Aug. 16 - Aug. 15 Retrospective Days Spent During this reporting period	Aug. 16 - Aug. 15 Prospective Days to be Spent in
Physician	Care Clinica	Yes	42/year	92/year

☐ I HAVE NO ACTIVITIES TO REPORT

I have completed and signed responses to your questionnaire and the above information is true and correct. I have not signed the questionnaire, which is a violation of University policy.

Academic Staff Member's Signature: [Signature] Date: 11/1/00

Please submit to your unit head for administrative review.

The University Policy on Conflicts of Commitment and Interest is available at: [http://www.vpa.uillinois.edu/policies/conflict\\_msp.asp](http://www.vpa.uillinois.edu/policies/conflict_msp.asp)

## Administrative Review and Approval, UIUC RNUA 2008-2009

(Please complete the Conflict of Interest/Commitment Review AND Approval of Activities sections. See Instructions for Administrative Review and Approval regarding forwarding and retention of the Reports of Non-University Activities). Deans/Directors should forward forms they receive and review to the Office of the Vice Chancellor for Research (or appropriate Vice President for UA Staff).

### PART IV. Conflict of Interest/Commitment Review (Please attach a copy of any referenced explanation.)

A. Based on the activity reported and to the best of my knowledge and in my judgment:

- ☒ No conflict of interest or commitment exists.
- ☐ A conflict of interest or commitment may exist, but is being monitored by the department.  
*If so, please attach an explanation and forward to the next administrative level (Dean, Director, or Vice President.)*
- ☐ A conflict of interest or commitment may exist that warrants further review.  
*If so, please attach an explanation and forward to the next administrative level (Dean, Director, or Vice President.)*

B. Please complete if question 3 on page 1 of the form is answered affirmatively:

As described by the academic staff member, the involvement of University of Illinois students, faculty and/or staff in his/her non-University activities does not appear to be detrimental to those individuals.

- ☐ Agree
- ☐ Disagree  
*If so, please attach an explanation and forward to the next administrative level (Dean, Director, or Vice President.)*

### PART V. Approval of Activities (Please attach a copy of any referenced explanation.)

A. Retrospective Activities (2007-2008)

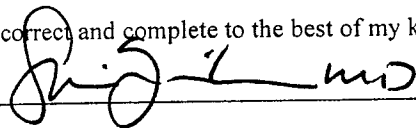
- ☒ No retrospective activities are reported or all retrospective activities are approved.
- ☐ Some or all retrospective activities are not approved.  
*If so, please attach an explanation and forward to the next administrative level (Dean, Director, or Vice President.)*

B. Prospective Activities (2008-2009)

- ☒ No prospective activities are reported or all prospective activities are approved.
- ☐ Some or all declared prospective activities are not approved.  
*If so, please attach an explanation and forward to the next administrative level (Dean, Director, or Vice President.)*

The above information is correct and complete to the best of my knowledge.

Unit Head Signature

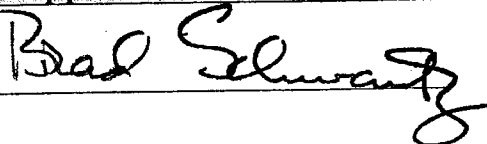


Date

11/19/08

### PART VI. Review and Approval of Activities by Dean and Others as Required.

Dean/Director/VP Signature  
(If approval needed)



Date

11-19-08

Additional Reviews  
(Signatures)

Date

Date

University of Illinois at Urbana Champaign  
Academic Staff  
2008-2009 Report of  
Non-University Activities (RNAU)

## DISCLOSURE AND REQUEST FOR PRIOR APPROVAL

Last Name: WHISENAND  
First Name: JAMES L  
Title / Rank: \_\_\_\_\_  
College: MEDICINE  
Dept. / Unit: PSYCHIATRY  
Appointment 5 %  
University Contract Period<sup>1</sup>  
9 months/ 10 months/ 12 months/ Summer

### PART I. Conflict of Interest Screening

Please attach an explanatory statement for all "yes" responses.

1. Do you have a consulting or other financial relationship with a sponsor of your research? ☐ yes\* ☒ no
2. Do you or does any member of your family<sup>2</sup> have a managerial role or a significant<sup>3</sup> financial relationship with a company that does business with the University or with a company in a field of your research? ☐ yes\* ☒ no
3. Do you have non-University professional activities or income producing activities involving University of Illinois students, or other faculty or staff? ☐ yes\* ☒ no
4. Do you or does any member of your immediate family have any other relationships, commitments, or activities that might present or appear to present a conflict of interest or commitment with your University of Illinois appointment? Such relationships may include financial or fiduciary interests or uncompensated activities. Report these whether or not you believe the conflict is manageable. ☐ yes\* ☒ no

\*Please list and explain in an attached statement any "yes" responses to the questions above. Lists in Part II do NOT suffice as explanation.

### PART II. Listing of Non-University Income Producing Activities

- \* Please complete this section regardless of your percentage appointment.
- \* Report days per week, where an accumulation of eight hours equals one day, regardless of time of day or day of week.
- \* Do not include amounts of compensation.
- \* Do not report "various" when reporting retrospective activity.
- \* Attach additional sheets if necessary

Nature of your activities (see instructions for examples)	For whom (e.g., company/ organization)	Do you have an ownership interest in this company / organization? (If so, please explain in an attached statement.)	2007-2008 Aug.16 - Aug.15 <u>Retrospective</u> Days Spent During this Reporting Period	2008-2009 Aug.16 - Aug.15 <u>Prospective</u> Days to be Spent in Current Reporting Period
Care Clinic Association Attending Psychiatrist	Care Clinic	Yes, shareholder in the clinic.	5 to 7 days/week.	5 to 7 days / week.

☐ I HAVE NO ACTIVITIES THAT I AM REQUIRED TO REPORT

### PART III. Affirmation

I affirm that I have read the University's Policy on Conflicts of Commitment and Interest<sup>4</sup> and the above information is true to the best of my knowledge. If significant changes in activities occur during the year, this form must be updated.

Academic Staff Member's Signature J. Whisenand

Date 11/12/08

Please submit to your unit head for administrative review and approval.

<sup>1</sup> Check all that apply. The University contract period includes evenings, weekends and holidays during the term of employment.

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<sup>3</sup> Federal research regulations define "significant" as financial interests exceeding \$10,000 or representing more than 5% ownership regardless of dollar value. The Illinois Procurement Code (5 Illinois Compiled Statutes 500/50-13) prohibits the award of University contracts to companies in which University employees who earn more than 60% of the Governor's salary have either (a) ownership interests in excess of 7 1/2% or (b) entitlements to annual income in amounts in excess of the salary of the Governor. (Governor's salary \$177,412 as of July 1, 2008)

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